

U.S NATIONAL STAGE WORKSHEET (DO/EO)

U.S. APPL. NO. 10/521990 INTERNATIONAL APPL. SE 2003/001582

APPLICATION FILED BY: 20 MOS., ____ OR 30 MOS., ____ SCREENED BY

PCT International Division

INTERNATIONAL APPLICATION PAPERS IN THE APPLICATION FILE:

☒ International application
☒ Article 19 amendments
☐ Priority Document(s) No. ____
☐ Request Form PCT/RO/101
☐ PCT/IB/302
☐ PCT/IB/304
☐ PCT/IB/306
☐ PCT/IB/308
☐ PCT/IB/331
☐ OTHER PCT/IB/____
☒ PCT/IPEA/409 also 416

☒ 409 annexes to IPER
☐ PCT/ISA/210 (Search report)
☐ Search report References
☐ Other Papers filed

WIPO PUBLICATION
PUBLICATION NO. WO 2004/034568
PUBLICATION DATE 22 Apr 04
PUBLICATION LANG., Eng/13h
NOT PUBLISHED
____ U.S. only ____ Requested

RECEIVED FROM THE APPLICANT: (other than checked above)

☒ National application basic fee paid
☐ Express Processing Requested
☒ Translation of the International Application
☐ Used the IB copy of the IA
☒ Description
☒ Claims 24
☒ Drawings 5
☐ Foreign Language in drawing
☐ Article 19 Amendments
☐ Amendment used in application
☐ Article 34 Amendment
☐ Amendment used in application
☐ DNA
☐ 1194 transaction done

☒ Preliminary Amendment(s) filed 19 Jun 05
____ second submission
☐ Information Disclosure Statement
____ second submission
☒ Assignment
☐ Forward to Assignment Branch
☐ Substitute Specification
☐ Small Entity Statement
____ type ____
☒ Oath/Declaration (date submitted ____)
☐ Not executed
☒ Executed
☐ Power of Attorney
☐ Change of Address

35 USC Receipt of Request (PTO - 1399 Transmittal Letter)

Date Acceptable oath/declaration received

102(e) Date

Date complete 35 USC 371 requirements met

DATE NOTICE COMPLETED

DO/EO 903 Notice of Acceptance

DO/EO 905 Notice of Missing Requirements

DO/EO 917 Notice of A defective oath or declaration

DO/EO 916 Notice of defective response

DO/EO 913 Notice of defective translation

DO/EO 909 Notification of Abandonment

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: _____

2 Serial/Patent # 10/521090

3 Please refund the following fee(s):

4 PAPER
NUMBER

5 DATE
FILED

6 AMOUNT

Filing

\$ 500

Amendment

\$

Extension of Time

\$

Notice of Appeal/Appeal

\$

Petition

\$

Issue

\$

Cert of Correction/Terminal Disc.

\$

Maintenance

\$

Assignment

\$

Other

\$

7 TOTAL AMOUNT
OF REFUND

\$ 500

8 TO BE REFUNDED BY:

Treasury Check

Credit Deposit A/C #:

9 08--2623

10 REASON:

Overpayment

Duplicate Payment

No Fee Due (Explanation):

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: _____

TITLE: _____

SIGNATURE: _____

PHONE: _____

OFFICE: _____

THIS SPACE RESERVED FOR FINANCE USE ONLY:

APPROVED: _____

DATE: _____

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B